

Dissertation

**A STUDY ON OPERATIONAL EFFICIENCY IN A HOME HEALTHCARE
ORGANIZATION**

Submitted to

IIHMR University, Jaipur



In partial fulfilment of the Requirements
for the Degree of
Master of Business Administration (MBA)

In

Hospital & Health Management

Submitted by

Aishwarya Ulhas Malkar

Under the guidance & supervision of

Dr. Goutam Sadhu

2022

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DECLARATION BY STUDENT

I hereby declare that this dissertation titled A Study On Operational Efficiency In A Home Healthcare Organization is Bonafede record of my original research work. I declare that it has not been submitted to any other university or institution for the award any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text

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Date:

July 19, 2022

Date: 30th June 2022

INTERNSHIP COMPLETION CERTIFICATION

CERTIFICATE

This to certify that **Ms Aishwarya Ulhas Malkar** in partial fulfillment of the requirements for the award of the degree of MBA (Hospital and Health Management) from the IIHMR University, Jaipur has successfully completed her internship at **Tattva Home Healthcare Private Limited**, Chennai from March 21, 2022 to June 20, 2022.

We wish her all the best for her future endeavors.

For Tattva Home Healthcare Pvt Ltd



Rakesh Inkollu
AGM-HR

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🌐 A Tattva Group Company

CERTIFICATE

This is to certify that dissertation titled A Study On Operational Efficiency In A Home Healthcare Organization, is a record of the research work undertaken by Ms. Aishwarya Malkar in partial fulfilment of the requirements for the award of the degree of MBA Hospital and Health Management from the IIHMR University, Jaipur under my guidance and supervision. The candidate's approach to the research study has been sincere, scientific and analytical.

Dr. Goutam Sadhu

Faculty Guide

IIHMR University, Jaipur

Date:

ABSTRACT

The operational efficiency of a home healthcare organization is investigated in this study, as well as the factors that influence it. Although all businesses prioritize operational efficiency, just a few succeed at planning, communicating, and managing performance-improvement projects. The impact of field service employees on home healthcare's functionality, economy, and quality is of interest to both healthcare executives and insurers. Few studies in many industries have looked at how it impacts efficiency and quality, or whether there is an optimal management level that benefits both. On the other hand, little or no work is done in home healthcare industry for operational efficiency. The precise objectives of this study were to: comprehend the concept of operational efficiency in home healthcare and discover the aspects that help and affect operational efficiency.

The major technique for data collection in this study was the MIS data. According to the findings, management variables such as leadership, planning, and organizing are critical in establishing operational efficiency in a home healthcare business. Communication is crucial in the workplace because an effective communication with field staff personals will help in their management. In order to improve working conditions, employ elements that affect operational efficiency, and retain devoted staff, adequate resources and skills must be available. The research discovered through unstructured interviews with managers that the skill and experience of field staff nurses, market analysis and many other factors were important in facilitating to the company's profitability.

The research also indicated that the majority of home healthcare organizations do not run efficiently because they are unaware of the elements that determine operational efficiency and lack the resources required to apply these aspects. According to this study report, increasing operational efficiency should be one of the company's top priorities. Organizations will be able to drive consistency in direct control of their essential business processes by implementing a company-wide operational efficiency framework.

Keywords: Operational Efficiency, Healthcare, Home Healthcare, Management, Communication, Field Staff, Nurses

ACKNOWLEDGEMENT

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I consider this opportunity as a great milestone to start my career in the field of health management and will try to use all the skills and knowledge gained throughout this internship in best way possible and strive for improvements to attain my career objectives.

TABLE OF CONTENTS

ABSTRACT.....	6
ACKNOWLEDGEMENT.....	7
TABLE OF CONTENTS.....	8
LIST OF TABLES.....	9
LIST OF FIGURES.....	10
ABBREVIATIONS.....	11
CHAPTER 1: INTRODUCTION.....	12
1.1 Background.....	13
1.2 Operational Efficiency.....	13
1.3 Gaps.....	14
1.4 Objective.....	14
CHAPTER 2: REVIEW OF LITERATURE.....	16
CHAPTER 3: METHODOLOGY.....	26
3.1 Research Questions.....	27
3.2 Study design.....	27
3.3 Study Setting.....	27
3.4 Study population.....	27
3.5 Study technique.....	27
3.6 Duration of study.....	27
3.7 Data collection procedure.....	27
3.8 Data analysis plan.....	28
3.9 Operational Definitions.....	28
CHAPTER 4: RESULTS.....	31
CHAPTER 5: ANALYSIS.....	37
CHAPTER 6: DISCUSSIONS.....	40
CHAPTER 7: CONCLUSION.....	44
CHAPTER 7: RECOMMENDATIONS.....	46
REFERENCES.....	48

LIST OF TABLES

TABLE 4.1	OPERATIONAL EFFICIENCY FOR JAN-MAY 2022 (IN PERCENTAGES) AT ONE LIFE	32
TABLE 4.2	AVERAGE HEADCOUNT, AVERAGE NUMBER OF SHIFTS AND AVERAGE NUMBER OF LEAVES AT ONE LIFE FROM JAN-MAY 2022	33
TABLE 4.3	ASPECTS INFLUENCING OPERATIONAL EFFICIENCY AT ONE LIFE HOME HEALTHCARE	35
TABLE 5.1	OPTIMUM OPERATIONAL EFFICIENCY AT ONE LIFE HOME HEALTHCARE (IN PERCENTAGES)	37

LIST OF FIGURES

FIGURE 3.1	METHODOLOGY WORKFLOW.....	30
FIGURE 4.1	OPERATIONAL EFFICIENCY FOR JANUARY 2022 - MAY 2022 AT ONE LIFE	32
FIGURE 4.2	OPERATIONAL EFFICIENCY, TOTAL STAFF ON- FIELD, TOTAL HC AND SHIFTS PER DAY (IN PERCENTAGES) AT ONE LIFE FROM JAN-MAY '22....	33
FIGURE 4.3	LEAVES, TOTAL HEADCOUNT AND SHIFTS TREND FOR JANUARY TO MAY 2022	34
FIGURE 4.4	TREND OF OPERATIONAL EFFICIENCY AND LEAVES TAKEN BY FIELD STAFF	34
FIGURE 5.1	GRAPHICAL ILLUSTRATION OF FACTORS INFLUENCING THE OPERATIONAL EFFICIENCY AT ONE LIFE HOME HEALTHCARE.....	42

ABBREVIATIONS

HHC: Home Healthcare Company

OE: Operational Efficiency

HC: Head Count

FS: Field Staff

BC: Bench Count

VAN: Voluntary Abandonment of Services

PDD: Probable Date of Drop / Discharge

NM: Nurse Manager

SM: Sales Manager

CHAPTER 1: INTRODUCTION

1.1 Background

The home health care sector is a crucial part of health-care systems because it has the potential to reduce total healthcare costs while also freeing up space in congested acute-care institutions such as hospitals. Home health as a service category is perplexing, and many people are unaware of the distinction between skilled and unskilled care: Nurses, physical, occupational, and speech therapists provide "skilled" home health care services. These services aim to improve clinical symptoms and functionality. In addition to or instead of professional services, home care aides provide personal care, sometimes known as homemaker services. This type of care is intended to help with everyday tasks including bathing, dressing, toileting, eating, and walking, as well as "necessary" daily duties like shopping and housekeeping.

COVID-19 has hastened the adoption of home healthcare systems in India, and these advances could result in a transformation in the structure of healthcare delivery. Although demand is growing, resources are limited. Home care firms are unable to handle rising patient demand due to a staff shortage and near-zero profit margins. The efficient use of resources is critical to the availability of home care services in the future. In the various areas of home health nurse districting, routing and scheduling organizations are currently facing numerous issues. Organizational performance is influenced by the availability and quality of such services. Continuous improvement has become critical to addressing such issues in general; this is where operational efficiency come into play. It finds and fixes problems while maximizing the limited resources available to ensure optimal performance.

1.2 Operational Efficiency

One of any company's main goals is to improve operational efficiency. Companies do endeavor to enhance operational efficiency, but they fail because changes aren't properly conveyed throughout the firm. There has been a lot of concern about home healthcare industry's competitiveness over the past few years. The reason for this is because this industry is going through its most chaotic period in terms of competitiveness, rapid advances in technology, as well as the increased demand for it. In spite general agreement that health-care efficiency and value must be improved, stakeholders cannot agree on how to define or quantify efficiency.

Definitions

Operational efficiency refers to how well a company manages its resources and uses them to make money. The operational efficiency of a firm is defined as the ratio of inputs (the costs of manufacturing your products and services) to outputs (the revenues made by selling those products and services). Operating expenses are divided by revenues in the fundamental efficiency ratio, with a lower result indicating better efficiency. The inventory turnover ratio and the accounts payable to sales ratio are two further operational efficiency ratios to consider. In addition, operating efficiency is a metric that evaluates how well inputs are turned into outputs. Operational efficiency is sometimes misunderstood as being exclusive to manufacturing firms and centered on the acquisition of newer, quicker machines.

The pursuit of operating efficiency in home healthcare, notably at One Life, is accomplished through field staff planning, scheduling, and management. Total number of field staff deployed to total available headcount is the ratio used to calculate operational efficiency.

Operational Efficiency =

The total available headcount is the number of field staff nurses on pay roles, which includes on-field deployed staff, bench staff, staff on leave and/or weekly offs, and red flags. The team of field staff nurses who work on pay roles are the most important resource at One Life home healthcare. The imbalance in field staff nurses' duty leads to various burnout scenarios hence, management of the field staffs becomes critical for the smooth functioning of any home healthcare organization.

1.3 Gaps

Capturing the underlying nature of Operational Efficiency and factors influencing it is relevant for home healthcare industry. OE has different definitions for different industries. The concept of OE in home healthcare has not been explored and is quite subjective at One Life Home Healthcare. The operations research community has a significant potential to solve the difficulties that home healthcare businesses encounter in order to improve their performance.

1.4 Objective

1. To understand operational efficiency in a home healthcare organization
2. To identify the management factors influencing operational efficiency in a home healthcare organization
3. To assess the influence of leave management on operational efficiency in a home healthcare organization

CHAPTER 2: REVIEW OF LITERATURE

According to a study titled "Measuring the operational and financial efficiency using a Malmquist data envelopment analysis: a case of Egyptian hospitals" conducted by Habib, A. M. and Shahwan, T. M., the effective use of organizational resources is critical to the survival and existence of top companies. Total operational expenses and total employee count were discovered to be common factors influencing hospital operational and financial efficiency.

A study titled "Dynamically accepting and scheduling patients for home healthcare" by Demirbilek M, Branke J, and Strauss A looked into another aspect. "Health care management science," which proposed home healthcare, is becoming increasingly important as life expectancy rises, chronic diseases become more prevalent, and healthcare facilities become scarce. However, there has always been a caregiver shortage. As a result of this, businesses must make efficient use of their employees' time in the scheduling and routing process.

In the study titled "Assessment and comparison of hospital operating efficiency under different management system", the considerable differences in the operation efficiency across different management systems is highlighted. And it proposed that the main factors related with operation efficiency are the technology and management level.

According to Madanhire I, Mbohwa C's "Enterprise Resource Planning (ERP) in Improving Operational Efficiency: Case Study," improved communication and collaboration among all departments resulted in increased operational efficiency.

Two major impediments to organisations' ability to provide effective and efficient patient care were identified in a paper titled "A decision methodology for managing operational efficiency and information disclosure risk in healthcare processes" by Bai, X., Gopal, R., Nunez, M., and Zhdanov, D. One of them was the growing shortage of healthcare workers.

A study titled "Controlling Healthcare Professionals: How Human Resource Management Influences Job Attitudes and Operational Efficiency" discovered the impact of HRM on the job attitudes of healthcare staff and, more specifically, on hospital operational efficiency.

"Healthcare planning and its potential role in increasing operational efficiency in the health sector: A viewpoint" proposes the strong links between healthcare planning and

healthcare stakeholders, as well as the key role of healthcare planning in the adoption of healthcare simulation modelling to improve operational efficiency.

"Assessing operational effectiveness in healthcare organizations: a systematic approach," according to the study. "International Journal of Healthcare Insurance" proposed a metric for measuring healthcare operational effectiveness (HOE). To improve efficiency, three indicators were identified: an availability indicator, a quality indicator, and an efficiency indicator.

NAME OF THE ARTICLE	DATE OF PUBLICATION	AUTHOR	SALIENT FEATURES
1. Measuring the operational and financial efficiency using a Malmquist data envelopment analysis: a case of Egyptian hospitals.	2020	Habib, A. M., & Shahwan, T. M.	The effective use of organizational resources is critical to the survival and existence of top companies. Total operational expenses and total employee count were found to be the common factors influencing both operational and financial efficiency of hospitals
2. Dynamically accepting and scheduling patients for home healthcare. Health care management science	2018	Demirbilek M, Branke J, Strauss A	Because of rising life expectancy, chronic diseases, and a lack of healthcare facilities, home care is becoming increasingly important. However, many people in need of care are unable to access home care services due to a shortage of caregivers. As a result, businesses must make efficient use of their employees' time

in the scheduling and routing process. The study proposes a Scenario Based Approach (SBA) that is based on generating several scenarios of future demand to determine whether or not we can assign visits to the patient under consideration. If possible, we check how many times and in which time slots the patient is scheduled the most frequently across all scenarios. Otherwise, the patient will be turned down.

3.	Assessment and comparison of hospital operating efficiency under different management system	2017	Sun M, Jian W.	There are considerable differences in the operation efficiency across different management systems. The main factors related with operation efficiency are the technology and management level. The study suggested that it is critical for all commission hospitals and municipal hospitals
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				to improve the management level and resource integration capability to increase operational efficiency.
4.	Enterprise Resource Planning (ERP) in Improving Operational Efficiency: Case Study	2016	Madanhire I, Mbohwa C.	The study looks into the possibility of increasing operational efficiency in a manufacturing system using enterprise resource planning (ERP). Some of the pillars considered in the process to achieve a reduction in working capital were integration of firm's activities, intra organizational communication, and wider collaboration. The study developed an ERP implementation framework, and it was demonstrated how the implementation would improve the operational efficiency of the manufacturing system. The ERP system increased employee efficiency because data and information could now be captured and updated at a single

point, eliminating the need for duplication of effort and wasting resources. The improved communication and collaboration among all departments resulted in increased operational efficiency

5.	A decision methodology for managing operational efficiency and information disclosure risk in healthcare processes	2016	Bai, X., Gopal, R., Nunez, M., & Zhdanov, D.	This paper addresses two critical issues confronting healthcare organizations: significant staff shortages and mandates to ensure patient safety and information security. Healthcare businesses are always challenged to operate at lower costs while providing high-quality service and respecting patient privacy as healthcare expenses continue to rise. However, two key obstacles are now impeding these organization's ability to provide effective and efficient patient care: a current and growing
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				scarcity of healthcare personnel, and patient privacy concerns.
6.	Controlling healthcare professionals: how human resource management influences job attitudes and operational efficiency	2014	Cogin JA, Ng JL, Lee I.	The study examined how human resource management (HRM) is implemented in Australian hospitals, as well as the impact HRM has on healthcare staff job attitudes and hospital operational efficiency. In this study it was observed that excessive use of behavior control helped to achieve short-term cost-cutting goals; however, this frequently resulted in operational inefficiencies. Effective human resource (HR) practices can positively contribute to an organization's efficiency, according to

the research. Paying more attention to HRM work could aid hospitals/healthcare firms in improving operational efficiency by subsequently improving staff attitudes

7.	Healthcare planning and its potential role increasing operational efficiency in the health sector: A viewpoint	2013	Virtue, A., Chaussalet, T., & Kelly, J.	This paper emphasizes the strong links between healthcare planning and healthcare stakeholders, and it proposes that healthcare planning can play a key role in the adoption of healthcare simulation modelling to improve operational efficiency.
8.	Assessing operational effectiveness in healthcare organizations: a systematic approach. International journal of health care quality assurance.	2010	Gomes CF, Yasin MM, Yasin Y.	The goal of this paper was to propose a method for measuring, tracking, monitoring, and continuously improving efficiency, availability, and quality in healthcare operational settings. Three indicators comprise the proposed measure of healthcare

operational
effectiveness (HOE).
There is an availability
indicator, a quality
indicator, and an
efficiency indicator
among them. By
quantifying the key
aspects of service
effectiveness in
healthcare operational
settings, this approach
tends to facilitate
systematic
improvement.

CHAPTER 3: METHODOLOGY

3.1 Research Questions

- (a) What is operational efficiency in home healthcare?
- (b) Which management factors influence operational efficiency in home healthcare?
- (c) Does leave management of field staff affect the operational efficiency in home healthcare?

3.2 Study design

The study used a descriptive method that included quantitative and qualitative methods. Because of the nature of description and the determination of correlations between variables, the descriptive design was chosen. Quantitative data was utilized to calculate the operational efficiency while Qualitative observation was used to equate the correlations between variables. Because no single strategy was appropriate in finding solutions to causative concerns, the study blended qualitative and quantitative methodologies.

3.3 Study Setting

One Life Home Healthcare, Chennai

3.4 Study population

Inclusion criteria: Field staff nurse on pay roles, Nurse Managers, Sales Managers

Exclusion criteria: Field staff nurses under VAN process

3.5 Study technique

Purposive sampling (total population sampling) was utilized for the investigation in this study

3.6 Duration of study

5 months (January 2022 – May 2022)

3.7 Data collection procedure

The goal was to minimize lead times, standardize and streamline the operations flow, and increase operations quality and efficiency. The work was based on previously available information and on-the-job observation. The clustered data was gathered from

actual records from January 2022 to May 2022 to create an observed trend.

Primary as well as some secondary data was collected through the daily MIS sheet maintained by the nurse managers at One Life home healthcare. Secondary data was obtained through observation, field visits and conducting unstructured interview with the nurse managers and sales managers

3.8 Data analysis plan

The analysis was based on statistical method of MS-Excel to attain the objective of this study. To describe the result, graphs and tables were used to add value to the information and make it more appealing

3.9 Operational Definitions

On-field staff

A staff on-field, delivering direct patient care services at patient's home is an on-field deployed staff. These staff work under the company pay roles.

Bench Staff

A bench staff is that which a firm hires as full-time employees and continues to pay them even when they are not on field providing services. Bench refers to the act of putting candidates on the back burner; adding them to a talent pool that you can readily access when challenging situation arises. At One Life home healthcare the bench staffs are of two types i.e., the Ops bench and the Sales bench.

- i. Operation or Ops Bench is critical and maintained at optimum level for the smooth functioning of the services.
 - ii. Sales Bench is the field staff who are maintained for new onboarding cases.
- Both of these staff work under the company pay roles.

Red Flag

Field staff is termed as a red flag when they avail continuous leaves for more than 3 consecutive days. They are included in the total available headcount however; they are not deployable and their salary is kept on hold.

VAN

VAN stands for Voluntary Abandonment of Services. A field staff is termed under a VAN when they avail continuous leaves for more than 6 consecutive days. They are removed from the available headcount and absconded thus; they are not deployable.

PDD

PDD stands for Probable Day of Drop. It is the estimated date at which the client (patient/attender) might stop availing the nursing services.

i) Calculation of OE

Obtain the daily MIS data from January 2022 to May 2022

Calculate the total available field staff headcount (on-field staff + bench staff + staff on leave/weekly off + Red Flag)

Calculate the Operational Efficiency using the formula

ii) Observation

Qualitative method of research by observation, field visits and conducting unstructured interviews with the nurse managers and sales manager

iii) Analysis

Conduct analysis with selected input (number of field staff / number of shifts) and output (operational efficiency)

Assessing the relationship between operational efficiency and other factors

Figure 3. 1 Methodology Workflow

CHAPTER 4: RESULTS

	<i>January</i>	<i>February</i>	<i>March</i>	<i>April</i>	<i>May</i>
<i>Operational Efficiency</i>	67.2	71.7	67.7	61.9	58.0

Table 4. 1 Operational efficiency for Jan-May 2022 (in percentages) at One Life

Figure 4. 1 Operational Efficiency for January 2022 - May 2022 at One Life Home Healthcare

Figure 4. 2 Operational efficiency, total field staff on-field, total available headcount and shifts per day at One Life from January to May 2022

	<i>Average Headcount</i>	<i>Average Number of Shifts</i>	<i>Average Number of Leaves</i>
<i>January</i>	84	61	18
<i>February</i>	82	64	14
<i>March</i>	88	65	18
<i>April</i>	96	67	23
<i>May</i>	101	67	22

Table 4. 2 Average headcount, Average number of shifts and average number of leaves at One Life from Jan-May 2022

Figure 4. 3 Leaves, total headcount and shifts Trend for January to May 2022

Figure 4. 4 Trend of Operational efficiency and leaves taken by field staff

MANAGEMENT ASPECTS INFLUENCING OPERATIONAL EFFICIENCY	DIRECTLY	INDIRECTLY
Recruitment	✓ ☐	
Training		✓ ☐
Planning	✓ ☐	
Scheduling	✓ ☐	
Communication		✓ ☐
Sales Generation	✓ ☐	
Bench Staff	✓ ☐	
Tariff		✓ ☐
PDD Analysis		✓ ☐
Market - B2B Analysis (Hospital Census)		✓ ☐

Table 4. 3 Aspects influencing Operational Efficiency at One Life Home Healthcare

CHAPTER 5: ANALYSIS

Notably at One Life Home Healthcare an optimum operational efficiency is derived as:

Total	Optimal	Bench	Public	Weekly Offs	Leaves
	Operational Efficiency		Holidays		
100	72.5	7	3	14.25	3.29

Table 5. 1 Optimum Operational Efficiency at One Life Home Healthcare (in percentages)

The above value for the operational efficiency is derived after considering the optimal workdays of the field staff. This helps in the efficient planning, scheduling and management of the field staff to different patients.

While the formula for calculating the day-to-day operational efficiency is as follows:

OPERATIONAL EFFICIENCY =

From Table 4.1 and Figure 4.1, we can observe that the operational efficiency for all the five months i.e., January, February, March, April and May for the year 2022 has been less than optimal. The highest OE was observed during February 2022 while that of lowest was in May 2022. The OE during the months of April and May has been quite low compared to other three months.

Figure 4.2 shows operational efficiency, total staff on-field (deployed), total HC and shifts per day (in percentages) at One Life from January 2022 to May 2022. The operational efficiency can be seen to be influenced by staff headcount and on-field staff directly. More the number of field staff are on field, higher is the operational efficiency. If the total headcount is greater than number of on-field staff, there is a significant decline in the operational efficiency. Also, we can observe that total number of on-field staff is directly proportional to the total number of shifts. Hence, we can say that operational efficiency is directly proportional to the total number of shifts per day.

Table 4.2, Figure 4.3 and 4.4 indicates the influence of leaves taken by field staff on operational efficiency of the organization. The average leaves taken by a field staff is observed to be increasing from January to May 2022. Only in the month of February 2022, we can note that the leaves taken were comparatively low. Even though the number of shifts per day has increased during the study period, with subsequent increase in the total available headcounts of the field staff, operational efficiency is less than optimal for all the months except in February. The high operational efficiency and less leaves taken by field staff during the month of February indicates its direct influence on it.

Unstructured interviews were conducted with five nurse managers and four sales managers from One Life, Chennai. Along with this the entire process flow starting right from lead generation, lead conversion, patient onboarding, planning, scheduling and management of the patient as well as hiring of field staff nurses was observed for three months i.e., from March to May 2022. Sales and Patient visits along with the sales and nurse managers respectively was also done. Table 4.2 illustrates the various areas that were identified to affect and influence the operational efficiency parameters at One Life home healthcare directly or indirectly.

CHAPTER 6: DISCUSSIONS

Different aspects that influence the operational efficiency in home healthcare organization are discussed below

(i) Planning, Scheduling and Communication

The study sought to see how management aspects like planning, organizing, and scheduling affected operational efficiency. To achieve this, respondents (nurse managers and sales managers) were asked a few leading questions, such as whether management considerations affect operational efficiency. All of the respondents agreed that planning, arranging, and scheduling had an impact on operational efficiency, according to the findings. As observed that leave management of field staff becomes an important aspect for the operational efficiency. This is a clear indicator that, if management systems are properly implemented, managerial factors contribute significantly to efficient operations in the business.

When asked why they thought managerial issues affected operational efficiency in the organization, the majority of them said it was because managers deploy field employees, schedule their visits, and arrange / plan them correctly. It is their responsibility to ensure that systems are implemented properly through proper planning, organizing, and scheduling processes. The importance of management factors to operational efficiency was determined by asking respondents about the importance of management factors. According to the findings, all respondents agreed that coordination and participation in decision making were important management factors in achieving operational efficiency. Employee motivation was also mentioned as a management factor that contributes to operational efficiency. Along with this, there was a clear indication that communication, particularly with field staff, plays a significant role in ensuring that the organization's operational efficiency systems are operational. Its primary functions are control, motivation, emotional expression, and information.

(ii) Recruitment & Training

The stability and skills of field staff nurses during the recruitment and training processes respectively were studied, and respondents were asked if it had any effect on the operational efficiency in the home healthcare industries under study. According to the findings, all of the respondents agreed that recruitment and training had an impact on operational efficiency. According to the findings, respondents considered the stability of the field staff, as well as their skills and experience, to be important in facilitating services. Stability helped in analyzing the attrition rate for the field staff nurses. It was

also stated that skill and experience were critical in familiarizing field personnel with potential business benefits.

(iii) Sales conversion

The study intended to investigate if lead generation and conversion had any effect on the home healthcare organization's operational efficiency. According to the findings of the survey, none of the respondents disagreed or strongly agreed that sales generating is vital to operational efficiency. This element was discovered to be directly proportional to the number of staff nurses on-field since it increases the number of shifts (patients) and decreases bench staff, hence enhancing operational efficiency. The greater the number of on-field staff and the lower the number of bench staff, the greater the operational efficiency. The sales conversion factor enables the company to better its financial performance while also retaining loyal employees (field staff nurses). The respondents indicated that availability of patients is necessary to enhance the automation of business operations.

(iv) Market Analysis

Finally, the study attempted to determine whether market analysis had any effect on operational efficiency. According to the study's findings, all respondents strongly agree that it has an indirect influence on the numerator of One Life Home Healthcare's operational efficiency. The hospital census is critical because the majority of business is B2B, making the home healthcare organization reliant on their stakeholder hospitals. Figure 4.2 shows that operational efficiency was low in April and May 2022. Low hospital census was observed during field visits in hospitals during these two months, which explains the low sales conversions.

INCREASE OF
OPERATIONAL EFFICIENCY

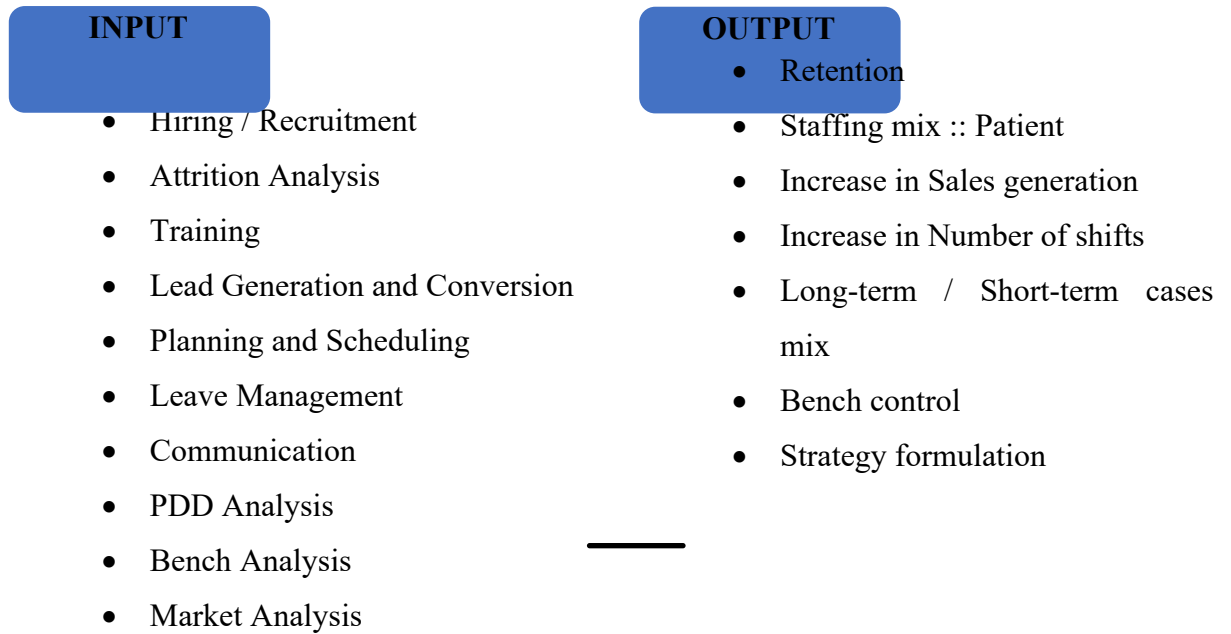


Figure 5. 1 Graphical illustration of factors influencing the operational efficiency at One Life Home Healthcare

CHAPTER 7: CONCLUSION

Currently, the home healthcare industry is overburdened by high competition, shortage of field staff and strict regulations. The operations research community has a huge opportunity to address the challenges that home care agencies face in order to improve themselves. Understanding the factors contributing to the operational efficiency of an organization will help in ensuring and sustaining excellent performances in home healthcare organizations.

Home healthcare field is service industry and personnel remain a critical component of operational efficiency in the industry. Simply put, the field staff-nurses represents home healthcare in its personalized form. The primary goal of maintaining optimal operational efficiency in a home healthcare setting is to promote business agility by lowering corporate costs and increasing profitability in terms of revenue.

The formula used at One Life Home Healthcare to calculate Operational efficiency is subjective. It analyzes the manpower utilization with respect to the business of the organization. Overutilization of some or inactivity of other field staff nurses is not appropriate for any HHC. As a result, one of the goals of any home healthcare company is to ensure that utilization runs smoothly. The total number of deployed field staff in numerator act as the tangible output of the company. It indicates the total services provided to the patients which is related to the revenue, increase in customer, business growth, market opportunities, and profits for the company. While the total employee headcount is the organization's input in the form of its key resources in the denominator. As a result, One Life Home Healthcare's operational efficiency is defined in the form of a utility term, which is obtained from a ratio of the company's output to the company's input.

Many factors right from the management, processes, environment to human issues influence directly or indirectly the operational efficiency of a home healthcare organization. Leave management of field staff is one of the major factors influencing operational efficiency in home healthcare.

It is important to identify and correct them to ensure optimal performance of the organization. This study has taken the first step by understanding the concept of operational efficiency in home healthcare industry. It has also quantified the effects of various elements on the operational efficiency of a home healthcare organization. It can be understood that operational efficiency is a key determinant of smooth functioning of a home healthcare company.

CHAPTER 7: RECOMMENDATIONS

Management of field staff leaves is observed to have direct influence on the operational efficiency of a home healthcare organization. Uniform co-ordination and communication among the nurse managers as well as between NMs and their respective assigned field staff will help in maintaining a system. Focus the field staff on compliance and impact of leave in home healthcare setting during interviews and training process. Leaves should be granted on quarterly basis so that planning becomes easier. Equipping more workforce for NM On-Call that works 24/7 and marking the bench staff absent when not responding for emergency duty along with deduction of certain amount of their salary will help in proper leave management of the field staff. This will then directly affect the operational efficiency in positive manner.

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